Please print or type in the <u>unshaded</u> areas only	37-800 000 7065
Please refer to the ADEM Form 8700-12 Notification Form Instructions before completing this form. Information requested here is required by law (§ 3010 of the Resource Conservation and Recovery Act).	Notification of Regulated Waste Activity  Alabama Department of Environmental Management
I. Notification Class (Check appropriate box and e	Facility's EPA ID Number
Initial Notification X A	nnual Notification A L 0 0 0 0 8 2 3 1 7 9
II. Operating Name of Facility (Include company a	and specific dile name
DRUMMOND CO	INC ABC COKE DIV
Operating Name of Facility (Continued)	I NO ABO ORE BIT
III: Change of Facility Name?	No Yes (If Yes, enter previous name of Facility below.)
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
IV. Location of Facility (Physical address not P. O.)	Box or Route Number
Street	
9 0 0   R A I L R O A	D A V E
City or Town	State Zip Code
T A R R A N T	
V. Geographic Location (See Instructions)  Method Latitude	Longitude
C O S 3 8 3 4 0 8	8 • L A T N 0 8 6 4 6 0 8 • L O N W
County Name	
J E F F E R S O N	
VI. Facility/Contact (Person to be contacted regarding	
Name (First)	(Last)
Job Title	Phone Number (Area Code and Number)
MGR ENGINEE	DI NO OOF OILO LO Ext
Contact Email Address (Optional)	
	Mpoling @ Abccoke.com
VII. Facility Mailing Address (See instructions).	
PO BOX 1024	6
City or Town	State Zip Code
BIRMINGHAM	A L 3 5 2 0 2 _ 0 2 4 6
WIII.Description of Facility Processes See la	
	, describe each of the processes at your facility that produce Regulated Wastes.
MOBILE EQUIPMENT MAINTENANCE     DIANT LIGHTING	The Tievas
2. PLANT LIGHTING 3.	
4.	
5.	JOHN WAY 20 PM 12 33
B. Noice Codes: Enter the six-digit North American	n Industry Classification System (NAICS) Code of the overall production, distribution, or service
Primary 2	e any additional NAICS Codes that describe the specific industrial processes that are used.  3 4 5
3 2 4 1 9 9	
ADEM Form 8700-12 (8/04)	Continued on Next Pag

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ease print or type in t	ne <u>unshaded</u> area	as only											ADEN	Form 8	700-12	(10/0
IX. Ownership (See			6.7			Delta A			14.7							
A. Legal Name	of Facility															
ABCC	OKE	D	IV	1	SIC	N	D	RL	JM	M	0	N I		C	0	
B. Name of Fa	cility's Lags	al Own	or													
		T O WITE							_			_	_	_		
DRUMN		C	0	1	N C											
Street, P. O. Bo		0 2	4 6		200 50	told la		T	T	П	oitle	n o	M st			Г
City or Town		0 2	410			St	ate	Zip (	Code							_
BIRMI	NGH	AM			TEAT	IA		3		2 0	2	_[	0	2 4	6	1
Phone Number				. Land	D. Owner	E. Operat Type	or	Change	of Owr	er	Mo	Date	Chang		rear .	
		3 4 2		Р	Туре	P	Yes		X	No	INIO	nui -	Day	Т	ear	7
2 0 5 - 8	+ 3 - 1	3 4 2		• 1	157 011	11,1	100	11								_
F. Name of Fa	cility's On-S	Site Op	erator		1 1 1						T	1				
	AS	AB	OV	E		TT	TT	Т			T		T	T		Г
S A M E Street , P. O. Bo			0 1	-												
						14	11	19			14	H				
City or Town						S	tate	Zip (	Code		_	1 1				7
	ATTA	0 0									1	_				
Phone Number	(Area Code and N	Vumber)														
1111	1 8	1 1	Ext.													
	1 1-1 1													man L.L.		
G. Name of Fa	cility's Pare	ent Con	npany													
SAME	AS	AB	OV	E			T				T			T		
Street , P. O. Be		mber														_
	To make the	1 1 1							2 16							
City or Town	STATES		115			S	tate	Zip	Code		_	1 1		-	-	٦
															L	1
Phone Number	(Area Code and I	Number)	(0.0)						of Owr	ier		Date	Chan		Year	_
			Ext.				Yes			No						
H. Name of Fa	cility's Pro	perty O	wner				0 1 9		9		10	IV.				_
SAME	AS	A B	OV	E				Toler								
Street , P. O. B	ox or Route Nu	mber												_	_	T
		100														L
City or Town						S	tate	Zip	Code	1	T	7		1	_	7
								Ch	-10			-		ane d		
Phone Number	(Area Code and I	Number)							of Ow	ner	M	Date	Da		Year	_
Filotte Number																
			Ext.				Yes			No						
	's EPA ID Nur	mber	Ext.				Yes		Ш				orm 8	700-	12 (8 Pag	

v lazara za	ADEM Form 8700-12
X. Gertification Status  Note: Pursuant to Rules 335-1-6 of the ADEM Administrative (	Code, all Notification Forms submitted to the Department must
include the appropriate certifica	
During at least 1 month of the year, this facility w	
A. Hazardous Waste Activities (Attach Schedule A)	B. Used Oil Activities (Attach Schedule B)
1. Large Quantity Generator ≥ 2,200 lbs/month	1. X Generator (≥ 25 gallons/month)
(≥ 1,000 kg/month)	2. Transporter/Transfer Facility
2. Small Quantity Generator between 221 and 2,199 lbs/month	3. Processor/Re-refiner
(between 101 and 999 kg/month)	4 Fuel Marketer
3. Conditionally Exempt Generator ≤ 220 lbs/month	5. Burner
(≤ 100 kg/month)	C. Halaman Marta Antholisa (Attack Ontortal Ci
(Note: Household generation is exempt under 335-14-201(4)(b)1.)  4. Transporter/Transfer Facility	C. Universal Waste Activities (Attach Schedule C)  1. Universal Waste Transporter
5. Treatment Facility – Combustion	2. Large Quantity Handler > 11,020 lbs
6. Treatment Facility – Other than Combustion	(≥ 5,000 kg)
7. Storage Facility	3. X Small Quantity Handler <11,020 lbs
8. Disposal Facility  Any ADEM Form 8700-12 submitted without all appropriate w	(< 5,000 kg)
4. Gentification	vaste schedules and cerunication lees will not be processed.
nformation, the information submitted is, to the best of my knowners are significant penalties for submitting false information, locations.  Ignature	I Name and Official Title (Type or Print)   Date Signed
	UP of OPERTIONS 5/12/2010
William R. moren	UP of OPERATIONS
Il Comments	
Jsed oil and tar decanter sludge are recyc	
Kippen" process where it is destructively	distilled into other marketable products
waste water treatment unit is used to tre	eat process liquids and
Waste water deadline in diffe is discu to the	
	is also recycled to the coke ovens.
	is also recycled to the coke ovens.
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	is also recycled to the coke ovens.
	Pale Processed
	Date Processed
	Date Processed
	Date Processed
Produces a non-hazardous sludge which i	Alabama Deparament of Fortronmental Managament
	Alabama Department of Environmental Management Remitts & Services Division  P QL Box 301453
Produces a non-hazardous sludge which i	Alabama Department of Fortironmental Management Permits & Services Division

Please print or type in the unshaded areas only

Please refer to the ADEM Form 8700-12 Notification Form Instructions before completing this form. Information requested here is required by law (§ 3010 of the Resource Conservation and Recovery Act).



ADEM Form 8700-12	
Schedule B	
Certification of Used	Oil
Management	

i. Type of used on Management Activity (see instructions)				
X A. Used Oil Generator/Collector	C. Off-Specification Used Oil Fuel Burner			
1. On-site Generation Only	1. Burns Only Off-Specification Used Oil Generated On-Site			
2. Do-it-yourself Collection Center (i.e., from off-site source)	2. Indicate Type(s) of Devices			
3. Collection Center (i.e., from off-site source)	a. Utility Boiler c. Industrial Furnace			
4. Aggregation Point (i.e., from off-site source)	b. Industrial Boiler			
B. Used Oil Fuel Marketer	D. Used Oil Transporter ††			
1. Directs Shipment of Used Oil to Off-Specification Burner	1. Only For Used Oil Generated On-site			
2. First Claims Used Oil Meets Specifications	2. Operates a Transfer Facility			
3. Burns Only Used Oil Generated On-site as On-Specification Fue				
	Contact (334) 271-7758 for more information			
II. Used Oil Generation				
During a typical year, this facility collects/generates	9,240 LBS of Used Oil.			
	(quantity in pounds)			
III. Used Oil Fuel Marketer				
During a typical year, this facility markets	of Used Oil.			
IV. Used Oil Burner	(quantity in pounds)			
	of Used Oil.			
During a typical year, this facility burns	(quantity in pounds)			
V. Used Oil Transporter				
During a typical year, this facility transports	of Used Oil.			
	(quantity in pounds)			
VI. Used Oil Processor/Re-refiner	A CAMERICAN SERVICE CONTRACTOR OF THE SERVICE			
During a typical year, this facility processes/re-refines	of Used Oil.			
	(quantity in pounds)			
Note: In order for this schedule to be accepted by Al	DEM, it must be attached to a completed Notification of			
	ust include the appropriate certification fees, as required			
by 335-1-6				
Comments: Used oils are recycled to our coke of	vens using the "Kinnen" process			
Where it is destructively distilled into other mark	etable products.			
Thiore it to document of all all the care, many	The production			
ADEM Form 8700-12 B (8/04)	Fac: "ty's EPA ID Number			
Page 1	Fac: "ty's EPA ID Number A L 0 0 0 0 8 2 3 1 7 9			

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ADEM Form 8700-12 B(8/04)

(for ADEM Use Only)

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Please refer to the ADEM Form 8700-12 Notification Form Instructions before completing this form. The Information requested here is required by law (§ 3010 of the Resource Conservation and



## ADEM Form 8700-12

ADEM FORM 6700-12
Schedule C
Certification of Universal
Waste Management

Conservation and Recovery Act).	waste Management	
I. Type of Universal Waste Activity (See Ins	structions)	
A. Universal Waste Transporter		
B. Large Quantity Handler	Estimated Yearly	Amount (in Ibs.)
	Accumulated	Generated
1. Battery(ies)		
2. Pesticide(s)		
3. Thermostat(s)		
4. Lamps		
5. Other (specify)		
X C. Small Quantity Handler	Estimated Yearly	Amount (in lbs.)
	<u>Accumulated</u>	Generated
1. Battery(ies)		
2. Pesticide(s)		
3. Thermostat(s)	658 LBS	658 LBS
4. Lamps 5. Other (specify)	650 LBS	050 LD3
II. Universal Waste Transporter		
During a typical year, this facility transports	(quantity in pounds)	of Universal Waste.
III. Universal Waste Handler	PASSET CONTRACTOR STREET	THE REPORT OF THE
During a typical year, this facility handles	658 LBS	of Universal Waste.
	(quantity in pounds)	
Note: In order for this schedule to be a	ocepted by ADEM it must be attached to a	completed Notification of
by 335-1-6.	700-12, and must include the appropriate cert	ilication rees, as required
Comments:		
Comments.		
ADEM Form 8700-12 C (8/04)	Facility's	EPA ID Number
Page 1	ALUUU	0 8 2 3 1 7 9

ADEM Form 8700-12 C(8/04)